

22882

Refund Ref:  
08/06/2008

0030059515

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PTO/SB/30

Am Exp.: XXXXXXXXXX2004

<b>Request For Continued Examination (RCE) Transmittal</b>	<i>Application Number</i>	10/808,242
	<i>Filing Date</i>	24 March 2004
	<i>First Named Inventor</i>	SOMMER, S.
	<i>Group Art Unit</i>	1733
	<i>Examiner Name</i>	Maki, S
	<i>Attorney Docket Number</i>	22882

This is a Request for Continued Examination under 37 CFR 1.114 of the above-identified application.

**1. Submission required under 37 CFR 1.114**

- a.  Previously submitted
  - i.  Consider the amendment(s)/reply under 37 CFR 1.116 filed \_\_\_\_\_.
  - ii.  Consider the arguments in the Appeal Brief or Reply brief filed \_\_\_\_\_.
  - iii.  Other \_\_\_\_\_.
- b.  Enclosed.
  - i.  Amendment/Reply
  - ii.  Affidavit(s)/Declaration(s)
  - iii.  Information Disclosure Statement (IDS)
  - iv.  Other \_\_\_\_\_.

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01 FC:1801

810.00 OP

**2. Miscellaneous**

- a.  Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of \_\_\_\_\_ months.
- b.  Other \_\_\_\_\_.

**3. Fees**

- a.  The Director is hereby authorized to charge the following fees or credit any overpayments to deposit account 18-2025.
  - i.  RCE fee required under 37 CFR 1.17(e).
  - ii.  Extension of time fee under 37 CFR 1.136 or 1.17
  - iii.  Other \_\_\_\_\_.
- b.  Check in the amount of \$\_\_\_\_\_.
- c.  Payment by credit card (PTO-2038 attached).

**SIGNATURE OF ATTORNEY**

Name	Andrew Wilford	Reg. No.	26,597
Signature		Date	5 December 2007

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal service with sufficient postage as express mail in an envelope addressed to: Commissioner for Patents, Box RCE, Washington, D.C. 20231 on: 5 December 2007.

Name	Elsie Reyes	EM155714446
Signature		Date

Adjustment date: 08/06/2008 CKHLOK  
12/07/2007 HLE333 00000056 10808242  
01 FC:1253  
-1050.00 OP

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND			
1 Date of Request:	08/04/08	2 Serial/Patent #	10808242
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
	Filing		\$
	Amendment		\$
X	Extension of Time		12/05/07 \$ 1,050.00
	Notice of Appeal/Appeal		\$
	Petition		\$
	Issue		\$
	Cert of Correction/Terminal Disc.		\$
	Maintenance		\$
	Assignment		\$
	Other		\$
		7 TOTAL AMOUNT OF REFUND	\$ 1,050.00
		8 TO BE REFUNDED BY:	CC
10 REASON:		Treasury Check	
	Overpayment	Credit Deposit A/C #:	
	Duplicate Payment	9	
X	No Fee Due (Explanation):  paid unnecessary extension of time fee		
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME:		Joan Olszewski	
SIGNATURE:		TITLE: Petition Examiner	
		PHONE: 571-272-7751	
OFFICE: Office of Petitions			
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****			
APPROVED: <u>OKhlo</u>		DATE: <u>8/6/08</u>	

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B